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Uncertific Patient Work Record	Application Number	10/040343
TRANSMITTAL	Filing Date	August 19, 2003
FORM	First Named Inventor	Konstantinos DONOS
(to be used for all correspondence after initial file	ing) Art Unit	To be assigned
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	Anomey Docket Number	103895-49750
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Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatic Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks 1. Declaration for Utility or Des	After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):
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